

# PROGRAM TIME SURVEY FOR CASE MANAGER LOCAL GOVERNMENTAL AGENCY

☐ Case Manager

☐ Supervisor

☐ Support person to case manager

Month and Year

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Name (Last, first, middle initial)							Civil service classification							Employee number							Program and claiming unit							Claiming unit location						
TYPE OF ACTIVITY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	TOTAL		
Other Programs/Activities																																		
Direct Patient Care																																		
Medi-Cal Outreach (A)																																		
Medi-Cal Outreach (B1) (Actual Count/Other)																																		
Medi-Cal Outreach (B2) (County-wide Average)																																		
Facilitating Medi-Cal Application																																		
Targeted Case Management																																		
MAA/TCM Coordination and Claims Administration																																		
MAA Implementation Training																																		
General Administration																																		
Paid Time Off																																		
NON-TCM PP&PD (A) For Supervisors only (Not Discounted)																																		
NON-TCM PP&PD (B) For Supervisors only (Discounted)																																		
TOTAL HOURS																																		
Employee's signature							Employee's telephone number (      )							Date							Supervisor's signature							Date						

## INSTRUCTIONS:

- See reverse of form for definitions of "TYPE OF SERVICE."
- Survey must be completed on a daily basis for the entire survey month. Enter the amount of time spent performing each type of service during your regular work hours in the column for that day (OT and the earning of CTO are coded to General Administration).
- Draw a vertical line through all columns representing days that are unpaid days (regular days off and unpaid leave).
- Record all of your time in 15 minute increments. If using fractions, use 1/4, 2/4, and 3/4 to record partial-hour increments. If using decimals, use .25, .50, and .75 to record partial-hour increments.
- At the end of each day, total each column in the "TOTAL HOURS" box at the bottom of the column. Each day's total must equal hours worked per day.
- At the end of the month, total all boxes in each row and record the sum in the "TOTAL" box at the right margin. Total amounts and record the sum in the box at the bottom-right corner.
- The sum in the bottom-right corner must equal the sum of the bottom row. Sign and date your survey on the last working day of the month and give it to your supervisor.

## TYPE OF SERVICE DESCRIPTIONS

### Other Programs/Activities

Time spent on activities unrelated to the administration of the Medi-Cal program, e.g., community service; education programs; program planning and policy development (PP&PD) for non-Medi-Cal programs; and/or Childhood Lead Poisoning Prevention Program administrative activities and case management; **non-Medi-Cal** Healthy Families application activities. Include time spent giving or receiving training not related to the Medi-Cal program.

### Direct Patient Care

Time spent providing direct physical or mental health services to patients. Include time spent giving or receiving training related to the provision of a Medi-Cal service.

### Medi-Cal Outreach (A) (Not Discounted)

A campaign, program, or ongoing activity that is **targeted to**: (1) bringing potential eligibles into the Medi-Cal system for the purpose of determining Medi-Cal eligibility; or (2) bringing Medi-Cal eligible people into Medi-Cal services. This includes the giving or receiving of training related to "Medi-Cal Outreach (A)." Outreach A activities are campaigns, programs, or ongoing activities that are **directed toward**: (1) the general population for the purpose of providing information about the Medi-Cal program in order to encourage those individuals who may be eligible for Medi-Cal to apply for Medi-Cal; or (2) bringing Medi-Cal eligibles into specific Medi-Cal covered services.

### Medi-Cal Outreach (B1) and (B2) (Discounted)

Outreach B activities are campaigns, programs, or ongoing activities that are **directed toward** bringing both Medi-Cal and non-Medi-Cal persons into health care services. This includes the giving or receiving of training related to "Medi-Cal Outreach (B)." Costs must be reduced or **discounted** by the appropriate Medi-Cal percent since the activity benefits or involves both Medi-Cal and non-Medi-Cal populations. Examples include: (1) campaigns directed toward bringing high-risk populations into health care services covered by Medi-Cal; (2) telephone, walk-in, or drop-in services for the purpose of informing or referring persons to services covered by Medi-Cal; and (3) the Medi-Cal health education component that is included as a part of a broader general health education program.

**NOTE: Medi-Cal Outreach B1:** Used when the Medi-Cal discount percentage methodology is the actual Medi-Cal client count or a Department of Health Services (DHS) approved methodology other than the county-wide average. The method must be described in the approved claiming plan.

**Medi-Cal Outreach B2:** Used when the approved discounting methodology is the county-wide Medi-Cal average, published by the State DHS.

### Facilitating Medi-Cal Application (Eligibility Intake)

Time Spent: (1) explaining Medi-Cal eligibility rules and the Medi-Cal eligibility process to prospective applicants; (2) assisting an applicant with filling out a Medi-Cal or Healthy Families/**Medi-Cal** eligibility application; (3) gathering information related to the application and eligibility determination/redetermination from a client; (4) providing/packaging necessary forms in preparation for the Medi-Cal eligibility determination; and/or (5) giving or receiving training related to "Facilitating Medi-Cal Application." This activity **does not** include the eligibility determination itself.

### Targeted Case Management (TCM)

Time spent providing one or more components of TCM services, such as assessment, plan development, referral, follow-up, crisis intervention planning, re-evaluation, or on other activities that are directly related to the provision of TCM services. Include time spent giving or receiving training related to the provision of one or more TCM service components.

### Medi-Cal Administrative Activities (MAA) and/or TCM Coordination and Local Governmental Agency (LGA) Claims Administration

Time spent: (1) drafting, revising, and submitting MAA claiming plans, and TCM performance monitoring plans; (2) serving as a liaison with claiming programs within the LGA and with the state and federal governments on MAA/TCM; (3) monitoring the performance of claiming programs; (4) administering LGA claiming, including compiling, preparing, submitting, revising, and overseeing TCM and MAA claims on an LGA-wide basis to the State; (5) attending training sessions, meetings, and conferences on TCM and/or MAA; (6) training LGA program and subcontractor staff on state, federal, and local requirements for MAA/TCM claiming performed by "MAA/TCM Coordinator and Claims Administration" staff **only**; (7) ensuring that MAA and TCM claims do not duplicate Medi-Cal claims for the same activities from other providers (this includes ensuring that services are **not** duplicated when a Medi-Cal beneficiary receives TCM services from more than one case manager or program); and (8) any other reasonable activities directly related to the LGA's administration of TCM and MAA.

### MAA Implementation Training

Time spent by persons, other than MAA/TCM Coordination and Claims Administration staff, giving or receiving training related to the overall implementation of the MAA program. For example, general training on MAA and/or on completing MAA/TCM time surveys.

### General Administration

Time Spent: (1) attending or conducting general, nonmedical staff meetings; (2) developing and monitoring program budgets; (3) providing instructional leadership; (4) site management; (5) supervising staff or participating in employee performance reviews; (6) reviewing departmental or unit procedures and rules; (7) presenting or participating in in-service orientations and programs; (8) health promotion activities for county employees; (9) earning of compensatory time off (CTO) or paid overtime; (10) breaks; and (11) the giving or receiving of training **unrelated** to the performance of MAA/TCM, e.g., computer training or generalized supervision training.

### Paid Time Off

Includes vacation, sick leave, paid holiday time, paid jury duty, and any other employee time off that is paid. This does **not** include breaks, off payroll time (dock), or the taking of CTO.

### Program Planning and Policy Development (PP&PD)

Supervisors of TCM case managers, who are not themselves TCM case managers, are allowed to time-survey **part-time** MAA-related PP&PD activities. This time is only claimable when the PP&PD activity is **not** related to TCM.

**NOTE: (A) Not Discounted** when PP&PD is related to programs serving **only** Medi-Cal clients.

**(B) Discounted** when PP&PD is related to programs serving **both** Medi-Cal and non-Medi-Cal clients.